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APPLICANTS

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**** CONTINUING DATA *******

THIS APPLICATION IS A CIP OF 09/528,802 03/20/2000
AND A CIP OF 09/539,479 03/30/2000
AND A CIP OF 09/539,306 03/30/2000
AND A CIP OF 09/539,478 03/30/2000
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**** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

** 04/02/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 254	TOTAL CLAIMS 8	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials			

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TITLE

Multiservice network processing device

FILING FEE RECEIVED 710	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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Other _____

Credit _____